## INDIANA COMMISSION ON PROPRIETARY EDUCATION

### **DEGREE APPLICATION INFORMATION**

Please read the following guidelines in preparing application for degree granting authority:

- 1. Read the enclosed copy of 570 IAC 1-10.1-4 through 1-10.1-8. Make certain that the program(s) meet specific criteria for the degree level(s) for which you are seeking approval.
- 2. Submit one (1) application for each program.
- 3. Beginning September 1, 2005, we are requesting that degree application materials be submitted by "electronic mail" [E-mail] if you have the capability to do so. If not, please mail the application and supportive documentation to the commission office. For supportive documentation, please submit ONLY a copy of the transcript for the last degree earned and/or copies of work experience, with dates, from previous employees when applicable.
- 4. Submit the application(s) at least sixty (60) days prior to the next quarterly Commission Meeting. The Commission Meetings are usually scheduled for the months of March, June, September, and December.
- 5. An application fee of \$100 is charged for *each* application submitted as a NEW degree program. A \$100 application fee is charged for each RENEWAL application. Please submit a check in the appropriate amount made out to the 'State of Indiana'.

<sup>\*\*</sup>The most important item to remember is that if you have any questions pertaining to the degree requirements and/or application form, please call Rebecca Carter, Director of Regulatory Compliance, at (317) 232-1328.

# INDIANA COMMISSION ON PROPRIETARY EDUCATION

### **DEGREE REGULATIONS**

#### 570 IAC 1-10.1-4 Associate degrees

Authority: IC 20-12-76-13

Affected: IC 20-12-76-26; IC 20-12-76-26

- Sec. 4. <u>Associate Degrees</u>. An Associate Degree may be awarded by an accredited institution to a student who has successfully completed an approved course of study comprised of a minimum of:
  - (A) 96 Quarter hours; or
  - (B) 64 Semester hours; or
  - (C) 960 Clock hours.
  - (1) <u>Associate of Applied Science</u>. This award is conferred upon a student who has successfully completed an approved course of study in a vocational program. The objectives of the program should emphasize the fact that the end result of the training shall be that the graduate possesses those job skills required for entry level employment in the specialty. **The curriculum shall provide for a minimum of 75% in the specialty**. This requirement applies to the minimum of 96-quarter hours, 64 semester hours, or 960 clock hours. This degree does not require the inclusion of general studies courses, but general studies courses may be a part of the program.

<u>Additional Standards: Staff.</u> The additional Standards for the award of the Associate in Applied Science degree are:

- (a) **One third** of the teaching staff in the program shall hold a higher degree, master's degree, a first professional degree, baccalaureate degree plus five (5) years practical experience in the specialty, or an excess of ten (10) years practical experience in the specialty.
- (b) **Two-thirds** of the teaching staff in the program shall maintain the following minimum qualifications:
- (1) a degree relevant to the specialty from an accredited two or four year collegiate institution; or
- (2) five (5) years documented practical experience in the specialty; or
- (3) a minimum of two (2) years documented practical experience in the specialty and relevant training in the specialty.
- (2) Associate in Arts or Associate in Science. The Associate in arts or the Associate in Science degree has the same requirements as those specified for the Associate degree in general. The intent of the Associate in Arts or the Associate in Science degree is that such a degree may be a terminal or a transfer award. The curriculum shall be comprised of a minimum of 50% in the specialty. At least 35% of the remaining courses shall be in the liberal arts. (This requirement applies to the minimum levels of 96 quarter, 64 semester, or 960 clock hours. Programs of longer duration shall not be required to increase the liberal arts component beyond these minimum requirements.)

<u>Additional Standards: Staff.</u> The additional Standards for the award of the Associate in Arts or the Associate in Science degree are:

- (a) a minimum of fifty percent 50% of the instructors in the program shall hold a master's degree, a first professional degree or a higher degree. The remainder shall hold baccalaureate degrees; or
- (b) the institution may be evaluated in comparison with similar institutions or programs in the public or private sector of postsecondary education.

(Indiana Commission on Proprietary Education; PTX, 10.04; filed Mar 7, 1979, 3:31 pm; 2 IR 475; errata, 6 IR 1938)

#### 570 IAC 1-10.1-5 Associate degree library/instructional resource center

Authority: IC 20-12-76-13 Affected: IC 20-12-76-26

Sec. 5. Additional Standards: Library/Instructional Resource Center. The Associate Degree Library or Instructional Resource Center shall hold an adequate number of volumes of current professional material, such as textbooks, periodicals and research studies related to the Associate Degree specialty. In addition, access to other library facilities in close geographic proximity to the school is desirable. The Library/Institutional Resource Center facilities will be evaluated as to the kind and type of institution to be appraised. The Commission shall decide competent Library/Instructional Resource Center facilities on an individual basis, since each institution's unique roll will dictate the needs of the Library/Instructional Resource Center and other resources available.

(Indiana Commission on Proprietary Education; PTX, 10.05; filed Mar 7, 1979, 3:35 pm: 2 IR 476; errata. 6 IR 1938)

#### 570 IAC 1-10.1-6 Advanced degrees

Authority: IC 20—12-76-13 Affected: IC 20-12-76-26

Sec. 6. <u>Advanced Degrees</u>. Awards of Advanced Degrees, such as the baccalaureate, master's, first professional or doctoral degrees, shall be treated as an "exception." Each request will be thoroughly studied and reviewed by the Commission before permission is granted to award such a degree(s). Proposed programs will be evaluated by the standards of similar programs in public or private postsecondary institutions.

(Indiana Commission on Proprietary Education; PTX, 10.06; filed Mar 7, 1979, 3:31 pm: 2 IR 476; errata, 6 IR 1938)

#### 570 IAC 1-10.1-7 Duration of degree award authorization

Authority: IC 20-12-76-13 Affected: IC 20-12-76-26

Sec. 7. <u>Degree Award Duration</u>. The authorization for the degree award shall be issued for a five-year period. Degree programs will be reviewed by the Commission at least every five (5) years and the renewal of degree award authority for a subsequent five (5) year period will be considered by the Commission in the fourth year of the initial degree award period.

(Indiana Commission on Proprietary Education; PTX, 10.07; filed Mar 7, 1979, 3:31 pm: 2 IR 476; errata, 6 IR 1938)

#### 570 IAC 1-10.1-8 Revocation or suspension of degree award authorization

Authority: IC 20-12-76-13 Affected: IC 20-12-76-26

Sec. 8. <u>Revocation/Suspension</u>. Degree authority may be revoked or suspended by the Commission if an institution is not in continual compliance with the Rules and Regulations covering the degree award period.

(Indiana Commission on Proprietary Education; PTX, 10.08; filed Mar 7, 1979, 3:31 pm: 2 IR 476: errata, 6 IR 1938)

### **INDIANA COMMISSION ON PROPRIETARY EDUCATION**

# DEGREE APPLICATION (New or Renewal program)

Use the <tab> key to advance to the next field, or select a field by clicking the cursor.

Name of Institution						
Name of Program						
Level of Degree (AAS, AS, AA	, BAS, BA, BS, MBA, MAS, MA, MS	, Ph.D.)				
Name of Person Preparing this Form						
Telephone Number		<u>Applicati</u>	on Type			
Date the Form was Prepared		☐ New	Renewal			
I. PROGRAM OBJECTIVES: Describe what the program is designed to achieve and explain how it is structured in order to accomplish the objectives.						

# II. <u>PROGRAM STRUCTURE</u>: List all courses in the program. Indicate course name, number, and number of credit hours or clock hours for each course.

NAME OF PROG	GRAM:				
TOTAL COURSE HOURS:		Check one: Quarter Hours Semester Hours			
LENGTH OF PR	OGRAM:	TUITION:	Clock Ho	_	
SPECIALTY CO	URSES:				
Course <u>Number</u>	Course <u>Title</u>			Course <u>Hours</u>	

# **SPECIALTY COURSES:** Course Course Course Number <u>Title</u> **Hours GENERAL EDUCATION / LIBERAL ARTS COURSES:** Course Course Course <u>Number</u> Title <u>Hours</u> Number of Credit/Clock Hrs. in Specialty: Percentage:

Percentage:

Percentage:

Number of Credit/Clock Hrs. in General Courses:

Number of Credit/Clock Hrs. in Liberal Arts:

If applicable:

III. <u>LIBRARY</u> : Please provide information pertaining to the library located in your institution.
1. Location of library; Hours of student access; Part-time, full-time librarian/staff:
2. Number of volumes of professional material:
3. Number of professional periodicals subscribed to:
4. Other library facilities in close geographical proximity for student access:
If you have any questions pertaining to the required standards for degree granting approval, please refer to 570 IAC 10.
Doc.: degreappform.doc

IV. <u>FACULTY</u> : Attach completed Instructor's Qualification Record for each instructor.  ** Include all required documentation pertaining to the qualifications of each instructor.						
Total # of Faculty in the Program:	Full-time:	Part-time:				
Fill out form below: (PLEASE LIST NAMES IN ALPHABETICAL ORDER.)						

List Faculty Names	Degree or	# Years of Working	# Years Teaching	# Years Teaching	Check	cone:
(Alphabetical Order)	Diploma Earned	Experience in Specialty	at Your School	at Other	Full- time	Part- time
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# INDIANA COMMISSION ON PROPRIETARY EDUCATION

## **INSTRUCTOR'S QUALIFICATION RECORD**

Instructions: Include <u>all</u> training/education applicable to current teaching assignments. This form will not be processed unless <u>all supportive documentation</u> required for review has been attached with this form (i.e., transcripts and letters identifying the precise nature of previous work and teaching experience, signed by a former direct supervisor.)

## Please TYPE the form.

NAME:					
•	(Last)		(First)	(Middle)	
NAME OF I	NSTITUTIO	DN:			
		Names	of Courses Taught:		
		1	1		
Caumaa af			Anna an Cubiast of	Period of Attendance	
Source of Training/Ed	lucation	Location	Area or Subject of Training/Education	From:	To:
				Employme	nt Period
Applicable Experience	e e	Location	Exact Nature of Experience	From:	To:
1					